

## ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
<b>FEE DETERMINATION</b>			
<b>O.I.P.E. CLASSIFIER</b>			11-3-00
<b>FORMALITY REVIEW</b>		7212	12-28-10
<b>RESPONSE FORMALITY REVIEW</b>			

## INDEX OF CLAIMS

✓ ..... Rejected N ..... Non-elected  
 = ..... Allowed I ..... Interference  
 - (Through numeral)... Canceled A ..... Appeal  
 ÷ ..... Restricted O ..... Objected

Claim	Date
Final Original 1	1/1/00
1	N
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21	
22	N
23	✓
24	
25	N
26	
27	
28	N
29	✓
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50	✓

Claim	Date
Final Original 31	1/1/00
51	✓
52	✓
53	N
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97	
98	N
99	✓
100	✓

Claim	Date
Final Original 101	1/1/00
102	
103	
104	
105	✓
106	N
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If more than 150 claims or 10 actions  
staple additional sheet here

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